Rec'd PETITIO 12 OCT 2005

OMBINED DECLARATION FO	R PATENT APPLICATION AND	POWER OF ATTORNEY	ATTORNEY'S DOCKET NUMBER			
and the state of t	onal Applications)	-	RUFF-3			
s a below named inventor, I hereby d	eclare that:					
My residence, post office address	My residence, post office address and citizenship are as stated below next to my name.					
I believe I am the original, first an names are listed below) of the su	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
SGK AND NEDD USED AS DIA	SGK AND NEDD USED AS DIAGNOSTIC AND THERAPEUTIC TARGETS					
the specification of which (check	the specification of which (check only one item below):					
is attached hereto.						
was filed as United St	ates application					
Serial No.						
on						
and was amended						
on(if applicable	c).					
was filed as PCT intern	national application					
Number PCT/EP03/05	•					
on June 4, 2003,						
and was amended under	er PCT Article 19					
on(if applicable						
	d and understand the contents of the above	7.7				
amended by any amendment refer	red to above.	ove-identified specification, incl	uding the claims, as			
	e information which is material to pater material information which became avails iling date of the continuation-in-part ap		3 1.56, including for prior application and			
country other than the Linited Store	nefits under 35 U.S.C. 119(a)-(d) or (f), certificatc(s), or 365(a) of any PCT intess of America, listed below and have also plant breeder's rights certificate(s), or an hich priority is claimed.	anadonal application which de	signated at least one			
uor foreign application number(s)	COUNTRY	FOREIGN FILING DATE (MM/DD/YYYY)	PRIORITY NOT CLAIMED			
102 25 844.9	GERMANY	June 4, 2002				
ffice connected therewith.	inventor, I hereby appoint the attorneys a umber 23599 to prosecute this application	and agents at Millen, White, Z on and transact all business in the	elano & Branigan, PC Patent and Trademark			
end Correspondence to: Customer No. 2	703/243-6333	Direct Telephone Anthony J. Zelan	Calls to:			

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ļ	Combined Declaration for Patent Application and Power of Attorney (Continued)	
į	(Includes Reference to PCT International Applications)	ATTORNEYS DOCKET NUMBER
		RUFF-3

FAMILY NAME FULL NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR LANG Florian CITY RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP TUEBINGEN **GERMANY GERMANY** STREET POST OFFICE CITY STATE & ZIP CODE/COUNTRY ADDRESS Gmelinstrasse 5, Physiologisches TUEBINGEN Institut I. **72076, GERMANY FAMILY NAME** FULL NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR LANG_ Karl 0 RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP TUEBINGEN. GERMANY **GERMANY** STREET POST OFFICE STATE & ZIP CODE/COUNTRY Gmelinstrasse 5, Physiologisches ADDRESS TUEBINGEN 72076, GERMANY Institut 1, FAMILY NAME FULL NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR Michael DIETER_ 0 RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITTZENSHIP 3 REUTLINGEN GERMANY **GERMANY** STREET CITY POST OFFICE STATE & ZIP CODE/COUNTRY ADDRESS REUTLINGEN Goerdelerstr, 17 **72770, GERMANY** FULL NAME FAMILY NAME PIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR 2 0 CITY RESIDENCE & STATE OR POREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP STREET POST OFFICE STATE & ZIP CODE/COUNTRY ADDRESS FAMILY NAME FULL NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR 2 O CITY RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 5 CITIZENSHIP STREET POST OFFICE CITY STATE & ZIP CODE/COUNTRY **ADDRESS** PAMILY NAME FULL NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR 2 Ω CITY RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP STREET POST OFFICE CITY STATE & ZIP CODE/COUNTRY ADDRESS FULL NAME PAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME OF INVENTOR 2 0 CITY RESIDENCE & STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP STREET POST OFFICE CITY STATE & ZIP CODE/COUNTRY ADDRESS

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Combined Declaration for Patent Application and Power of Attorney (Continued)
(Includes Reference to PCT International Applications)

ATTORNEYS DOCKET NUMBER
RUFF-3

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2	FULL NAME OF INVENTOR	PAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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	POST OPPICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY
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	Post office Address	STREET	CITY	STATE & ZIF CODE/COUNTRY
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	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODP/COUNTRY
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2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OPPICE ADDRESS	STREET	СТТҮ	STATE & ZIP CODE/COUNTRY
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 100! of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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SIGNATURE OF REVENEER 201	×6.9.05	SIGNATURE OF INVENTOR 207	DATE	
SIGNATURE OF INVENTOR (202) X MENU MENU	DATE 8- S-OS	SIGNATURE OF INVENTOR 208	DATE	
SIGNATURE OF INVENTOR 203	DATE 7.9.05	SIGNATURE OF INVENTOR 209	DATE	
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 21D	DATE	
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE	
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE	